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Bib Data Sheet

CONFIRMATION NO. 9369

<b>SERIAL NUMBER</b> 09/039,260	<b>FILING OR 371(c) DATE</b> 03/16/1998 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> 4821-306	
<b>APPLICANTS</b> A.K. GUNNAR ABERG, WESTBOROUGH, MA; JOHN R. MCCULLOUGH, WORCESTER, MA; EMIL R. SMITH, SHREWSBURY, MA;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 08/783,393 01/13/1997 PAT 5,731,319 which is a DIV of 08/366,651 12/30/1994 PAT 5,595,997					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/30/1998</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 13
<b>ADDRESS</b> 20583					
<b>TITLE</b> COMPOSITIONS OF DESCARBOETHOXYLORATADINE					
<b>FILING FEE RECEIVED</b> 1838	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		